



Outpatient Services • Adult Day Health Care Centers

September 2005 • Bulletin 371

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RHC and FQHC Rate Changes

Effective for dates of service on or after October 1, 2005, the Medicare Economic Index (MEI) percentage is increased to 3.1 percent for any Rural Health Clinic (RHC) or Federally Qualified Health Center (FQHC) with an established Prospective Payment System (PPS) rate. Federal requirements mandate that any RHC or FQHC with an established PPS rate must have it adjusted according to the MEI.

CPT-4 Procedure Codes and Modifiers Billing Reminder

Providers are reminded that they must select the appropriate CPT-4 code and modifier when billing. The CPT-4 code descriptor must match the procedure performed. *This information is reflected on manual replacement page ub comp op 19 (Part 2).*



Inpatient Provider Cut-Off Date for Proprietary and Non-HIPAA Standard Electronic Claims Formats: December 1, 2005

In accordance with efforts to comply with the federally mandated Health Insurance Portability and Accountability Act (HIPAA), Medi-Cal has established a plan to discontinue acceptance of proprietary and non-HIPAA standard electronic formats for electronic claims transactions. The first provider community to be affected is the Inpatient provider community.

Beginning **December 1, 2005**, proprietary and non-HIPAA standard electronic claim formats submitted by Inpatient providers will no longer be accepted.

Providers may call the Telephone Service Center (TSC) at 1-800-541-5555 for more information.

Cut-off dates for non-HIPAA standard claim formats for all other provider communities will be announced in upcoming *Medi-Cal Updates*.

Instructions for Manual Replacement Pages

Part 2

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Remove and replace: ub comp op 19/20